PATENT APPLICATION FEE DETERMINATION RECORD Effective December 8, 2004

09/764247

	CLAIMS AS FILED - PART I				SMALL ENTITY				OTHER THAN					
	TOTAL CLAIMS			(Colu	(Column 1)		(Column 2)		TYPE		•	OR SMALL ENTITY		
	_	TOTAL CLAI						RATE	1 65					
	FOR TOTAL CHARGEABLE CLAIMS		NUMB	NUMBER FILED		NUMBER EXTRA		BASIC FI	FE		RATE			
-			254815 01 1111					1		E 150.0	0	BASIC FI	300.00	
- :	Г			S	.ainus 20=			1	X\$ 25=		- 01	X\$50=		
	INDEPENDENT CLAIMS			·	minus 3 =				X100=		Of	X200=		
	MULTIPLE DEPENDENT CLAIM PRESENT								+180=		7		 	
	* If the difference in column 1 is I			is less than	less than zero, enter "		"0" in column 2		TOTAL		OF	ــــــــــــــــــــــــــــــــــــــ		
					ED - PART II		:		TOTAL		_] OF		<u></u>	
1	(Column 1) (Column 2) (Column 2)							. \	SMALL	ENTITY	. OR		R THAIN ENTITY	
	ENTA	71/2/10	REMAINING	;	HIGHE	ER PRESENT			_	ADDI-	7	<u> </u>	ADDI-	
		11/2/00	AFTER AMENDMEN	•	PREVIOU PAID F				RATE	TIONA		RATE	TIONAL	
	S	Total	- 8	Minus	-20		=	• -	(\$ 25=	FEE	-		FEE	
	ME	Independent		Minus	***	3	= -	-		-	HOR.	X\$50=		
	_	FIRST PRESENTATION OF MUL			TIPLE DEPENDENT C		AIM 📗		(100=		OR	X200=	·	
		•		٠					180=		OR	+360=		
									TOTAL HT. FEE		OR	TOTAL ADDIT. FEE		
-			(Column 1)	<u>. </u>	(Column 2) (Column 3)						-	AUDII. FEE		
AMENDMENT			CLAIMS REMAINING		HIGHES	šΤ·	T-			1.455				
	NEN-		AFTER		. NUMBE PREVIOUS		PRESENT EXTRA	RATE	ATE	ADDI- TIONAL		DATE	ADDI-	
			AMENDMENT		PAID FO		CXTDX		""	FEE	1 1	RATE	TIONAL FEE	
	5	Total	•	Minus	A4 ·		=	X	25=		OR	X\$50=	1 6.6	
		Independent	*	Minus	***		=	X1	00=		1	X200=		
-	FIRST PRESENTATION OF MULTIPLE DEPEND					AIM		-			OR			
			•	•					=08		OR	+360=	1	
									T. FEE		OR A	TOTAL ODIT. FEE		
ار	(Column 1) (Column 2) (Column 3)							•				•,	.].	
AMENDMENT &	1		CLAIMS REMAINING		HIGHEST NUMBER		BOCCCUT		-1	ADDI-	٠ ٢	 1	ADDI-	
		<u> </u>	AFTER AMENDMENT	٠,	PREVIOUS PAID FOR	LY	PRESENT EXTRA	RA		IONAL	.	RATE	TIONAL	
	1	Total	•	Minus	**		=	Ye	25=	FEE	-	V/050	FEE	
	[ndependent	•	Minus	***		=	-			OR	X\$50=		
L	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							X10)0=		OR	X200=		
								+18	0=		OR	+360=		
											1	 		
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		·					*,						1	